



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

May 1, 2015

Carrie Taylor  
1007 West Wall  
Jefferson, IA 50129

Dear Child Care Provider,

This letter is in regards to the April 29, 2015 compliance check of your Level C2, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home.

The following areas were out of compliance at the time of my visit:

☐ 110.5(1)b All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child. *Medications (household and daycare) need to be locked.*

☐ 110.5(1)n Each smoke detector is tested monthly, and a record is kept for inspection purposes. *The provider did not document testing smoke detectors monthly. Provider needs to test smoke detectors and document.*

110.5(2)c An individual file is maintained for each staff assistant and contains:

☐ 110.5(2)c A completed DHS Criminal History Record Check, form B, 595-1396 *The assistant does not have documents to demonstrate this was completed. Providers are sent a letter from registration stating the person in question is approved as an assistant. The provider does not have this in her file. Provider was referred to Central Registration to obtain.*

☐ 110.5(2)c A completed Request for Child Abuse Information, form 470-0643 *The assistant does not have documents to demonstrate this was completed. Providers are sent a letter from registration stating the person in question is approved as an assistant. The provider does not have this in her file. Provider was referred to Central Registration to obtain.*

110.5(2)d An individual file is maintained for each substitute and contains:

☐ 110.5(2)d A completed DHS Criminal History Record Check, form B, 595-1396. *The substitute does not have documents to demonstrate this was completed. Providers are sent a letter from registration stating the person in question is approved as an substitute. The provider does not have this in her file. Provider was referred to Central Registration to obtain.*

☐ 110.5(2)d A completed Request for Child Abuse Information, form 470-0643 *The substitute does not have documents to demonstrate this was completed. Providers are sent a letter from registration*

*stating the person in question is approved as an substitute. The provider does not have this in her file. Provider was referred to Central Registration to obtain.*

#### 110.5(8) Children's Files

☐ 110.5(8) An individual file is maintained for each child and updated annually or when there are changes. *The provider has 15 children enrolled and there were 11 children present during compliance check. Provider needs to make sure all forms in each child's file is updated yearly.*

Each file contains:

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment. *Provider had these forms in the files however some of the forms were not dated and there was one form which was filled out but not signed.*

110.5(8)g A signed and dated immunization certificate provided by the state department of public health. *Provider had immunizations in files. Please make sure these are signed and dated.*

#### 110.5(10) Substitutes *Provider has a substitute but reported she has not used substitute for at least the last year.*

☐ 110.5(10)d Use of a substitute is limited to: No more than 25 hours per month. An additional period of up to two weeks in a 12-month period. *Provider reported she has not used substitute for last year so there are no records for hours used.*

☐ 110.5(10)e The provider maintains a written record of the number of hours substitute care is provided, including the date and the name of the substitute. *Provider reported she has not used substitute for last year so there are no records for hours used.*

#### 110.10(1) SPECIFIC REQUIREMENTS FOR CHILD DEVELOPMENT HOME CATEGORY "C" *The provider was in compliance during check and this is for informational purposes only.*

110.10(1) a Not more than 12 preschool children present at any one time, including infants.

110.10(1)b Of these 12 children, not more than four children under the age of 24 months are present at any one time.

110.10(1)c Not more than two additional school-age children present for less than two hours at any one time.

110.10(1)d Not more than two additional children who are receiving care on a part-time basis.

110.10(1)e Not more than sixteen children present when the emergency school closing exception is in effect.

110.10(1)e If more than 8 children are present at any one time due to an emergency school closing exception, the provider shall be assisted by a DHS-approved assistant who is at least 18 years of age.

110.10(1)f Both providers are present whenever 4 children under the age of 18 months are in care, and whenever more than 8 children are present.

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

☒ Based on the items out of compliance listed above, a recheck or follow up visit to your home is not necessary. However, it is essential you provide documentation to the Department that certifies you have corrected each of the identified regulatory violations and are now in complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

**I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.**

**Please sign and date below, and return this form in the provided envelope by: June 15, 2015.**

X \_\_\_\_\_  
Signature Date

Please do not hesitate to contact me at DHS at (712) 328 - 5713 if you have any questions regarding this letter.

Sincerely,



Social Worker II



Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 1-800-945-9778 .

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to [http://www.dhs.state.ia.us/Consumers/Child\\_Care/Professional\\_Development.html](http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html) and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).